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Approved for use through 10/31/2002 OMB 0651-0032

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JCS91 U.S. PTO
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02/02/01

UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. M4065.0392/P392

First Named Inventor Paul A. Farrar

Title MICRO C-4 SEMICONDUCTOR DIE AND
METHOD FOR DEPOSITING CONNECTION
SITES THEREON

Express Mail Label No.

APPLICATION ELEMENTS <i>See MPEP chapter 600 concerning utility patent application contents.</i>		ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231	
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original, and a duplicate for fee processing)</i>		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)	
2. <input type="checkbox"/> Applicant claims small entity status <i>See 37 CFR 1.27</i>		8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i>	
3. <input checked="" type="checkbox"/> Specification <i>(preferred arrangement set forth below)</i> <ul style="list-style-type: none"> - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 		a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: <ul style="list-style-type: none"> i. <input type="checkbox"/> CD-ROM or CD-R (2 copies), or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies	
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 8]		9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))	
5. Oath or Declaration [Total Pages 3]		10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <i>(when there is an assignee)</i>	
a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/division with Box 17 completed)</i>		11. <input type="checkbox"/> English Translation Document (if applicable)	
i. <input type="checkbox"/> DELETION OF INVENTOR(S) <i>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)</i>		12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449	
6. <input type="checkbox"/> Application Data Sheet See 37 CFR 1.76		13. <input type="checkbox"/> Preliminary Amendment	
17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76		14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i>	
<input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No _____		15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i>	
Prior application information: Examiner _____		Group / Art Unit: _____	
For CONTINUATION or DIVISIONAL APPS only The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.			
18. CORRESPONDENCE ADDRESS			
<input type="checkbox"/> Customer Number or Bar Code Label		<input type="checkbox"/> Correspondence address below	
Name	DICKSTEIN SHAPIRO MORIN & OSHINSKY LLP Thomas J. D'Amico		
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Name (Print/Type)	Thomas J. D'Amico		
Signature			
	Registration No. (Attorney/Agent)		
	Date	February 2, 2001	

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FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 1,324.00)

Complete if Known

Application Number	Not Yet Assigned
Filing Date	February 2, 2001
First Named Inventor	Paul A. Farrar
Examiner Name	Not Yet Assigned
Group Art Unit	Not Yet Assigned

Attorney Docket No. M4065.0392/P392

METHOD OF PAYMENT

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to

Deposit Account Number 04-1073

Deposit Account Name

X Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 Applicant claims small entity status See 37 CFR 1.272. Payment Enclosed Check Credit Card Money Order Other

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)
105	130	205	65
127	50	227	25
139	130	139	130
147	2,520	147	2,520
112	920*	112	920*
113	1,840*	113	1,840*
115	110	215	55
116	390	216	195
117	890	217	445
118	1,390	218	695
128	1,890	228	945
119	310	219	155
120	310	220	155
121	270	221	135
138	1,510	138	1,510
140	110	240	55
141	1,240	241	620
142	1,240	242	620
143	440	243	220
144	600	244	300
122	130	122	130
123	50	123	50
126	240	126	240
581	40	581	40
146	710	246	355
149	710	249	355
179	710	279	355
169	900	169	900
Other fee (specify) _____			
*Reduced by Basic Filing Fee Paid			SUBTOTAL (3) (\$ 40.00)

2. EXTRA CLAIM FEES

	Extra Claims	Fee from below	Fee Paid
Total Claims	43	-20 = 23 x 18.00	= 414.00
Independent Claims	5	-3 = 2 x 80.00	= 160.00
Multiple Dependent			

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	80	202	40	Independent claims in excess of 3
104	270	204	135	Multiple dependent claim, if not paid
109	80	209	40	** Reissue independent claims over original patent
110	18	210	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 574.00)

**or number previously paid, if greater. For Reissues, see above

Complete (if applicable)

Name (print/type)	Thomas J. D'Amico	Registration No. (Attorney/Agent)	28,371	Telephone	(202) 828-2232
Signature				Date	February 2, 2001